IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA

OCT 15 2020
Districe U.S. Co.
Total Solve

	EREAT FALLS	DIVISION
	(You must fill in this blank.	See Instruction H)
·		

Write the full name of the plaintiff who is filing this complaint and prisoner number, if any.)

Case No. (to be filled in by the Clerk's Office)

Plaintiff,

-against-

PETER MOLNAR

See attached for other Defendant(s)

(Write the full name(s) of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. The names listed in the above caption must be identical to those contained in Section IV.

Defendants.

Do not include addresses here and do not use et al.)

COMPLAINT

(Pro Se Prisoner)
PURSUANT TO
42 U.S.C. \$1983 And for
Bivers V.Six Unknown Agents, 403 U.S. 388(71)
Jury Trial Demanded: ■ Yes □ No
(check one)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in *forma pauperis*.

Prisoner Complaint Form
Plaintiff's Last Name Fourstal

CONTINUED FROM PAGE #1 (COUNT 1, List of Defendant(5):)

- 3. Anthony Perkins
- 4. Peter Bludworth
- 5. Unknown Nursels)
- 6. Mary Smitherene.
- 7. Trina Kloos
- 8. Susan Clark
- 9. Robert Murtz
- 10. Michael Eliason
- 11. Unknown United States Probation and Parole Officer

INSTRUCTIONS

- 1. Use this form to file a civil complaint with the United States District Court for the District of Montana. Include only counts/causes of action and facts not legal arguments or citations. You may attach additional pages where necessary. Your complaint must be typed or legibly handwritten in ink and on white paper. Write on only one side of the paper. Do not use highlighters and do not staple or otherwise bind your papers. All pleadings and other papers submitted for filing must be on 8 ½" x 11" paper (letter size). You must sign the complaint (see page 8). Your signature need not be notarized but it must be an original and not a copy. The Clerk's Office cannot provide you copies of documents in your file without prepayment of \$0.10 per page (for documents electronically available) or \$0.50 (for documents not electronically available). Please keep a copy of the documents you send to the Court.
- 2. The filing fee for a complaint is \$350.00 plus a \$50.00 administrative fee for a total of \$400.00. This amount is set by Congress and cannot be changed by the Court. If you pay the filing fee, you will be responsible for serving the complaint on each defendant and any costs associated with such service.
- 3. If you are unable to prepay the entire filing fee and service costs for this action, you may file a motion to proceed in forma pauperis. If you are a prisoner and your motion to proceed in forma pauperis is granted, the Court will assess an initial partial filing fee equal to 20% of the average monthly deposits to your prison account for the six months immediately preceding the filing of the action, or 20% of the average monthly balance in your prison account for the same six month period, whichever is greater. Thereafter, the balance of the \$350.00 filing fee will be collected in installments equal to 20% of your preceding month's income any time the amount in your account exceeds \$10.00. The \$50.00 administrative fee does not apply to persons granted *in forma pauperis* status. You will be required to continue making these payments even if you complaint is dismissed.
- 4. Complaints submitted by persons proceeding in forma pauperis and complaints submitted by prisoners suing a governmental entity or employee must be reviewed by the Court before the defendants are required to answer. See 28 U.S.C. §§ 1915(e)(2), 1915A(a); 42 U.S.C. § 1997e(c). The Court will dismiss your complaint before it is served on the defendants if: (1) your allegation of poverty is untrue; (2) the action is frivolous or malicious; (3) your complaint does not state a claim upon which relief may be granted; or (4) you sue a defendant for money damages and that defendant is immune from liability for money damages. After the Court completes the review process, you will receive an Order explaining the findings and any further action you may or must take. The review process may take a few months; each case receives the judge's individual attention.

Plaintiffs should not serve defendants, pursue discovery, or request entry of default judgment prior to the completion of this review process.

- 5. Prisoners who have had three or more cases dismissed as frivolous, malicious, or failing to state a claim upon which relief may be granted (strikes) will not be permitted to file any further civil actions without prepaying the filing fee unless they are in imminent danger of serious harm. See 28 U.S.C. § 1915(g).
- Prisoners may not maintain more than two civil actions in forma pauperis at one time, unless the prisoner shows that he or she is under imminent danger of serious physical injury.
- 7. The case caption (page 1 of this form) must indicate the proper Division for filing. The proper Division is where the alleged wrong(s) occurred. When you have completed your complaint, mail the *original* of your complaint and either the full filing fee or your motion to proceed in forma pauperis to the proper Division:

-H-

Billings Division:

Big Horn, Carbon, Carter, Custer, Dawson, Fallon, Garfield, Golden Valley, McCone, Musselshell, Park, Petroleum, Powder River, Prairie, Richland, Rosebud, Stillwater, Sweetgrass, Treasure, Wheatland, Wibaux, and Yellowstone Counties

U.S. District Court Clerk, 601 2nd Avenue North, Suite 1200, Billings, MT 59101

Butte Division: Beaverhead, Deer Lodge, Gallatin, Madison, and Silver Bow Counties
U.S. District Court Clerk, 400 N. Main, Butte, MT 59701

Great Falls Division: Blaine, Cascade, Chouteau, Daniels, Fergus, Glacier, Hill, Judith Basin,
Liberty, Phillips, Pondera, Roosevelt, Sheridan, Teton, Toole, and Valley
Counties (Crossroads Correctional Center is located in Toole County
and all claims arising at CCC should be filed in Great Falls)
U.S. District Court Clerk, 125 Central Ave. West, Great Falls, MT 59404

Helena Division: Broadwater, Jefferson, Lewis & Clark, Meagher, and Powell Counties

(Montana State Prison is located in Powell County and all claims

arising at MSP should be filed in Helena)

U.S. District Court Clerk, 901 Front St., Ste 2100, Helena, MT 59626

Missoula Division: Flathead, Granite, Lake, Lincoln, Mineral, Missoula, Ravalli, and Sanders Counties

U.S. District Court Clerk, P.O. Box 8537, Missoula, MT 59807

Prisoner Complaint Form
Plaintiff's Last Name <u>Fourstal</u>

A.	Plaint	Name: Victor Charles Fourstar, To And Robert Mitchell Sc.	
		All other names by which you have been known:	
		N/A	
		ID Number: 07418-046 and 05468-046	
		Current Institution: Gressroads Correctional Center	
		Address: 50 Crossroads Drive	
		Shelby, montana 59474	
Indicate	whether y	u are a prisoner or other confined person as follows (check all that apply)):
		Pretrial detainee	
		Civilly committed detainee	
		Immigration detainee Convicted and sentenced state prisoner	
		Convicted and sentenced state prisoner Convicted and sentenced federal prisoner	
	. 🗷	Other (explain) Technical Supervised Release Violato	
В.	Defe	dant(s)	
		Provide the information below for each defendant named in the complain whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and chumhether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed	eck
De	fendant l	5. 1:	
	Nan	: David Berkbebile	
	Job	Title: Lore Livic Regional Director	
	Emp	oyer: Love Civic/ Corrections Lorperation of America / Crosscoods Correction	
	Add	/P.178/	
		Shelby, mantana 59474	

Prisoner Complaint Form

Plaintiff's Last Name Fourth

(Revised March 2016)

Page 4 of 9

Defendant No. 2:			
Name:	Peter Molnor		
Job or Title:			
Employer:			
Address:	50 Crossroads	Drive	
			7474
🛭 Indi	vidual capacity	Ø	Official capacity
Defendant No. 3:			
Name:	Anthony Perkin	<u> </u>	
Job or Title:	Medical Adminis	tecto/	
Employer:	Crosseeds Corre	tional Cen	<i>ter</i>
Address:	50 Crossroads	Drive	· · · · · · · · · · · · · · · · · · ·
	_Shelby, month	110 59470	4
⊠ Indi	vidual capacity	区	Official capacity
Defendant No. 4:			
Name:			
Job or Title:	Warden		
Employer:	Crossroads Com	ectional Le	onter
Address:	50 Crossroads	Drive-	
	Shelby, Monte	na 59474	<u>/</u>
			Official capacity
(NOTE: If more space is	needed to furnish t labeled "APPEN,	he above in DIX A: PA	nformation, continue on a blank sheet IRTIES").
			PUED ON PAGE ATMCHMENT:)
II. Basis for Jurisdiction			•
primarily for pro se p	derar legar basis to prisoners challengir	r your clair ig the const	n, if known. This form is designed titutionality of their conditions of
confinement, claims	which are often bro	ught under	r 42 U.S.C. § 1983 (against state,
county, or municipal	defendants) or in a	"Bivens" a	action (against federal defendants).
⊠ 42 U.:	S.C. § 1983 (state,	county, or	municipal defendants)
	n under <i>Bivens v. S</i> 1971) (federal defer		n Federal Narcotics Agents, 403 U.S.
Prisoner Complaint Form			(Revised March 2016)
Plaintiff's Last NameFo	115th		Page 5 of 9

CONTINUED FROM PAGE #5 (COUNTY, PARTIES:)

Names): Unknown Nursels) (Ibb or title: Nursels); Mary Smitherene (Ibb or Title: Prison Librarian); Trina Kloos (Ibb or Title: Prison Lase Manager); Swan Clark (Ibb or Title: Prison Counselor); Robert Murtz (Ibb or Title: Prison Chief Unit Manager)

Address of all Aforementioned Parties and Employer: cross roads Lowectional Lenter, 50 Crossroads Drive, Shelby, Montana 59474

All Parties are sued in their : & Individual and or & Official capacity

Name! Michael Eliason

Job or Title: United States Probation and Parole Office

Employer: Office of United States Probation and Parole

Address : 605 2nd Avenue South, Suite 200

Bo. Box 327

Glasgow, MT. 59230

M Individual copacity

A Official copacity

Name: Unknown U.S., Probation and Parole Office/ Top or Title: United States Probation and Parole Office/ Employer: Office of United States Probation and Parole Address: 219 5th Street South Great Falls, Montana 59401

1 Individual capacity

A Official capacity

III. Statement of Claim(s)

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph.

A. Count I:

- 1. What federal constitutional or statutory right(s) do you claim is/are being violated by defendants? Lst, 5th, 8th, and 14th Amendments and Art. L, \$1 of U.S.

 Lonstitution; Article II, Section to of the Montaga Densitution; 18 u.s.c. \$3,666,1343; Title II of ADA, 42 u.s.c. \$12131; Rehab. Act, 29 u.s.c. \$794; APA, 5 u.s.c. \$702, et seq.; Emergency Medical Treatment & Active Labor Act; Bod Man "Clause of 1868 FT. Loranie Treaty and 1851 FT. Loranie Treaty; and the Medical Immunity Let, 1st Step Act.

 2. What date and approximate time did the events giving rise to your claim(s)
- From mid- July, 2020 Present for Pater Molnar on Hep C, T.B. and Diabetes treatment. Mid-July, 2020 Present for wiknown Nursels) on course of quevantine and treatment 9/23/20-10/10/20 for Kloes & Chark.
 - 3. Supporting Facts: (Include all facts you consider important, including names of persons involved, places, and dates. Describe what happened without citing legal arguments, cases, or statutes).
- With a deliberate indifference to the rights of Plaintiffes) Victor C. Fourstar, are and Robert Mitchell, Sr., defendant David Berkbebile netting as Core Civic Regional Director and pursuant to local and 4.5. Marshal Service incentive contracts, compacts & agreements did fail to provide provide proper Hep C and covid-19 screening and treatment training to his subordinates Peter Moinar and unknown nurses at crossroads correctional Center in Shelby, MT., and Team Staffat CCC in Shelby, MT.
- With a deliberate indifference to the rights of Plaintiffes) Victore Fourstar, are Robert Mitchell, 51-1
 (CONTINUED ON PAGE ATTACHMENT:)
 - 4. Defendants Involved: (List the name of each defendant involved in this claim and specifically describe what each defendant did or did not do to allegedly cause your injury).

Acting as one continuous unit and pursuant to a on-going common scheme defendant David Beikbebile committed froud upon the United States by providing orders and agreements to his subordinates Peter Blodworth, Anthony Perkins, Peter Moinar and unknown Nouseas)/defendants) to give new covid-ig testing procedures as follows without differentiating between non-prisoners (with Plaintitles) fourster and Mitchell were Jone prisoners (which Plaintitles) fourster and Mitchell were Jone prisoners (which Plaintitles) to be now sentenced for fulling to Registeras a sex offender):

(CONTINUED ON PAGE ATTACHMENT!)

(NOTE: For each additional claim, use a blank sheet labeled "APPENDIX B. STATEMENT OF CLAIMS." You must address paragraphs IV(A)(1-4) for each count., following the directions under IV.

Prisoner Complaint Form	(Revised March 2016)
Plaintiff's Last Name Fourstal	Page 6 of 9

CONTINUED FROM PAGE #6 (Court 1, Section 3- Supposting Facts:)

defendant Peter Molnar acting as a Physician Assistant and pursuant to local and United States Machail Service incentive contracts, compacts & agreements did fail to provide proper. Hep C and covid-19 screening and treatment and quarantine procedures to his subord-inates unknown nursess and Librian an Mury Smitherene at Crossroads Correction-al Center in Shelby, MT., and Team Staff Trina Kloos and Susan Clark at CCC.

- With a deliberate indifference to the rights of Plaintiffus) Victor a Fourtar, Tr. and Robert Mitchell, Sr., defendants) unknown nursess acting as medical providers and pursuant to local and U.S. Marshal Service incentive contracts, compacts & agreements did fail to provide proper Hep C and covid-19 screening, treatment and quarantine procedures at Crossr-oads Correctional Center in Shelby, mr.
- With a deliberate indifference to the rights of Plaintiffes Victor E. Fourstal, Tr. and Robert Mitchell, St., defendant Mary Smitherene acting as a prison librarizin and pursuant to 10 cal and U.S. Marshal Service incentive contracts, compacts * agreements did fail to provide access to the legal law library and legal case law and legal photocopies during Plaintiff—(5) inproper Hep C and course 19 screening, treatment and quarantine procedures at cross roads Correctional Center in Shelby, MT.
- With a deliberate indifference to the rights of Plaintiffus Victor t Fourstar, ar and Robert

 **2

 Mitchell, Sr., defendant Trino. Kloos acting as a prison lase manager and pursuant to lucal and U.S. Marshal Service incentive contracts, compacts ** agreements did fail to provide

 Tenm services, access to Administrative Grievance forms, access to 2018 First Step Act

 maximum gratuities, rent * deposit, home-confinement, pre-release, legal calls \$ 1-hour

 Iday for recleation and showers during Plaintiffus) Hepc ** company quarantine at coe.

 With a deliberate indifference to the rights of Plaintiffus Victor C. Fourstay, on and Robert

 Mitchell, sr., defendant Susan Chirk acting as a prison Courselor and pursuant to local and U.

 S. Marshal Service incentive contracts, compacts ** agreements did fail to provide team Services,

 (** With Michael Eliason-USPPO)

 i (** 2* With UnKnown U.S. Probation Officer)

CONTINUED FROM PAGE #6 (Lount 1, Section 3 Supporting Facts:)

access to Administrative Grievance forms, access to 2019 First step Act maximum gratuties, rent & deposit, home continement, pre-release, and failed to provide access to legal calls and I-hour day for recreation and showers during Plaintiffes . Hep. c. & Covid-19 quarantine at Crossroads Correctional Center in Shelby, mt. (ccc)

- With a deliberate indifference to the rights of Plaintiffes) Victor C. Fourstay, Tr. and Robert Mitchell, Sr., defendant Robert Murtz acting as Chief Unit Minager and pursuant to local and U.S. Marshall Service incentive contracts, compacts & agreements did fail to properly train his subordinates Trina Kloos and Susan Clark on providing Team Services, access to Adminitative Grievance forms, access to 2018 First Step Act maximum gratuities, rent & deposit, home-confinement, pre-release, and access to legal calls and I-hour/day for recreation & showers during Plaintiffes, Hep C and course 19 quarantine at CCC in Shelby, m.T..
- With a deliberate indifference to the rights of Plaintiff(s) Victor C. Fourstains, and Robert Mitchell, St., defendant Peter Bludworth acting as Prison Warden and pursuant to Local and U.S.

 Marshal Service incentive contracts, compacts & agreements did fail to properly train his subordinates Peter Molnar and unknown Nursels) on proper Hep C and covid-19 screening, treatment and quarantine procedures at CCC in Shelby, mt., and did fail to properly train his subordinate Anthony Perkins on proper Hep C and covid-19 screening, treatment and quarantine procedures at CCC in Shelby, mt.
- With a deliberate indifference to the rights of Plaintiffes) Victor C. Fourstage and Robert Mitchell, Sr., defendant Anthony Perkin's acting as Medical Administrator and pursuant to local and U.S. Marshal Service incertive contracts, compacts & agreements did fail to properly train his subordinates Peter Molnar and Unknown Nursers) on proper Hep C and covid 19 screening, treatment and quarrantee procedures at CCC in Shelby, mt.

^{(*1} Acting as one continuous unit with u.s. Probation Office: Michael Eliason)

CONTINUED FROM PAGE #6 (Count 1, Section 4- Defendants Involved:)

- If detainees tested pesitive for covid-19 in I-unit on October 9, 2020, then they would be subjected to 10-days quarentine in I-unit without adequate separation/protections to non-positive detainees housed in I-unit with them.
- If detainees tested negative for covid-19 in I-unit on october 9, 2020, then they would be howed with other non-positive detainees housed in I-unit.
- If detainees refused the covid-19 testing in I-unit on scholary, 2020, then they would be automatically subjected to 14-days of quarantine in X-unit without respects to the prior two(2) 14-day quarantines from on or about September 9,2020 September 25,2020 (that were the result of Poul I efferson, Victor Nava and other testing positive for covid-14, yet then housed in X-unit with Plaintifies I Fourstav and Mitchell who tested negative during that same time period).
- If detainers previously tested positive for covid-19 as Plaintiff's) Fourstwand Mitchell Did on ocabout September 28, 2020 as a result of being housed in I-vait with covid-19 positive detainers Paul Teffeson, Victor Nava and other, then they would not be given a new covid-19 test on October 9, 2020. The justification given for not providing Plaintiff's) Fourstwand Mitchell new covid-19 tests on October 9, 2020 and covid-19 medication/treatment Dexameths one was that prior positive covid-19 test results will show for up to 5-months (during which time Eliason will compound harms).

 If detained previously tested positive for covid-19 and of were on guarantine for covid-19, then Plaintiff Fourstar would not be provided with his scheduled Hep C liver scar appointment (on 9/15/2020 Peter Melnar provided Notification of Diagnost tic Test Results that states: You are being scheduled for a follow-up medical appointment. You will be notified of your appointment date and time.") purportedly because Hep C treatment is non-emergent.

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive. (Do not cite legal arguments, cases, or statutes). Attach additional pages if needed.

1. Defendants) Berkbebile, etal.'s actions or inactions as one continuous unit caused or contributed to the violation of Plaintiff Fourstar's right to emergent cure for his Hep C diagnosis and right to be free from covid-19 exposure, right to access the courts in his supervised referse proceeding scrub its ancillary matters appropriate to it, right to confidential attorney-client communications, right to (CONTINUED ON PAGE ATTACHMENT:)

(NOTE: If more space is needed to furnish the above information, continue on a blank sheet labeled "APPENDIX C: INJURY").

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims. The flaintifles demand a jury trial and appointment of class course I and expert witness (with permission to exceed the limitations of the Criminal Justice Act) pursuant to Rule 23(b)(2) of the Fed. R. of Liv. Procedures (with permission for Fourster to act as class representative as a law/peralegal student at the College of Missouria in Missouria, mrs.); And flaintifles demand from defendants of allowing fees and costs; and demand from defendants) \$30-million (Continued on PAGE Altachment)

(NOTE: If more space is needed to furnish the above information, continue on a blank sheet labeled "APPENDIX D: REQUEST FOR RELIEF").

VI. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Α.	Did your cla	. ,	while you were	confined	in a jail, pr	ison, or oth	ıer
	₩.	Yes		No			
	ing rise to yo		rrectional facili Brossroads Correc				

Prisoner Complaint Form	(Revised March 2016)
Plaintiff's Last Name <u>Fourstar</u>	Page 7 of 9

CONTINUED FROM PAGE # 7 (COUNT L, Section IV- Injuries:)

maximum gratuity, home-confinement, pre-release, rent and deposit and transfer to a facility within 500 driving miles of his residence, right to access the administrative remedy program under the 2018 First Step Act, Fowster suffered wrongful Lovid 19 exposure, progressive. Hep c and covid-19 and T.B. symptoms night sweats, nousea, shortness of bre-ath, loss of appetite, fever, high blood pressure, sneezing, running nose, sore throat, inability to fully and fairly appeal his revocation of superised release and prosecute his ancillary matters appropriate to those proceedings, wrongful infliction of severe emotional pain and duress, wrongful repeated recidivism and wrongful detention, disposate medical pain and duress, wrongful repeated recidivism and wrongful detention, disposate medical pain and of failure to treat medical Hep C, covid 19 and T.B. conditions because of the defeadants conduct.

2. Defendant(s) Beckbebile, etalis notions or inactions as one continuous unit caused or contributed to the violation of Plaintiff Mitchell's right to emergent care for his covid-19 exposure, right to access the counts in his criminal federal Failing to Register As A sex offender proceedings, right to confidential attorney client communications, right to maximum gratuity, home-confinement, pre-release, rentand deposit and transfer to a facility within 500-driving miles of his residence, recalculation of good time-credits under the 2018 First step Act, right to access the Administrative remeas program, Mitchell suffered wrongful Covid-19 exposure and symptoms night sweats, nausea, shortness of breath, loss of appetite, fever, sneezing, runny nose, sore throat, inability to fully and fairly mount a defense to his criminal Failing to Register As A sex offenser, wrongful infliction of of severe emotional pain and durress, wrongful repeated recidivism and wrongful imprisonment, disposate medical care and/or failure to treat covid 19 condition because of the defendants; conduct

^{(*1} recolculation of good-time credits) (*2 As provided by Great Falls U.S.P.P.O.)

CONTINUED FROM PAGE #7 (Count 1, Section V- Relief:)

Mollars punitive damages for wrongful infliction of severe emotional pain \$ duress;

Plaintiffes) demand from defendants \$ 30-million dollars compensatory damages for the wrongful covid-19 exposures (and Plaintiff Fourstar demands for million dollars compensatory damages from defendants) for wrongful deteriating Hep C conditions); And Plaintiffes) requests for the court to issue injunctive relief enjoining the defendants) from enforcing the local and U.S. Marsal Service incentive guidelines, contracts, compacts & agreements complained of; And Plaintiffes requests for the Court to issue declaratory relief declaring the defendants) actions and conduct complained of unconstitutional and in violation of 18 U.S.C. \$ 666,1343; And Plaintiffes) request immediate release from their wrongful detertion (and imprisonment), and other relief equitable and just.

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure? Yes Do not know C. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint? Yes Do No If you did file a grievance answer the following questions: 1. Where did you file the grievance? Cross reads Correctional Center, 50	re
C. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint? Yes No D. If you did file a grievance answer the following questions:	
your claim(s) arose concerning the facts relating to this complaint? No D. If you did file a grievance answer the following questions:	
,	
Crossroads Drive, Shelby, MT. 59474	
2. What did you claim in your grievance? 1.) Medical staff does not have a proper Hep C, TB and probates screening I Treatment procedure set in place and failed to provide treatment, noted disparately, retalitarily and misconduct; 2.) Medical staff acted illegally under incentive based contracts, compacts, agreements; 3.) Staff used counting risks as justification not perform duties; 4.) Staff failed to provide medical records. 3. What was the result, if any? Pending andlor failed to respond.	
4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.) Stuff failed to respond couldn't is delaying responding using couldn't sike as just fications,	3
 E. If you did not file a grievance, answer the following questions: 1. If there are any reasons why you did not file a grievance, state them here i) staff failed to provide grievance forms and duties due to company risks and unit quantine.): }:
2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any: I informed love livic Regional Director David Berkbebile of medical staffs failure to provide emergent larce. He took a picture of leter Molner's appointment form on 10/8/20 I requested let step Act gratuity funds, home infinement with klows *Chark on 10/7/20 * 10/10/20. F. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. I believe the Prison Litigation Reform hat exhaustion requirement is non-applicable to me as a non-prisoner as defined in 12 uses \$1992e(h) and also where comp-19 risk and suicide watch cell were used as justification fol not providing me with growing forms. (NOTE: You may attach as exhibits to this complaint any documents related to the exhaustion	
your administrative remedies.)	

Prisoner Complaint Form (Revised March 2016)
Plaintiff's Last Name Fourster Page 8 of 9

VII. Plaintiff's Declaration

- A. Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.
- B. I understand I must keep the Court informed of my current mailing address and my failure to do so may result in dismissal of this Complaint without notice to me.
- C. I understand the Federal Rules of Civil Procedure <u>prohibit</u> litigants filing civil complaints from using certain information in documents submitted to the Court. In order to comply with these rules, I understand that:
 - social security numbers, taxpayer identification numbers, and financial account numbers must include only the last four digits (e.g. xxx-xx-5271, xx-xxx5271, xxxxxxxx3567);
 - birth dates must include the year of birth only (e.g. xx/xx/2001); and
 - names of persons under the age of 18 must include initials only (e.g. L.K.).

If my documents (including exhibits) contain any of the above listed information, I understand it is my responsibility to black that information out before sending those documents to the Court.

I understand I am responsible for protecting the privacy of this information.

- D. I understand the submission of a false statement or answer to any question in this complaint may subject me to penalties for perjury. I declare under penalty of perjury that I am the Plaintiff in this action, I have read this complaint, and the information I set forth herein is true and correct. 28 U.S.C. § 1746; 18 U.S.C. § 1621.
- E. This Complaint was deposited in the prison system for legal mail, postage prepaid or paid by the prison, on

Executed at Shelby, mr CLC	on October 10	, 20 <i>20</i>
(Location)	(Date)	2468-046
Signature of Plaintiff : ples	HUTCO Robe	et M. tchells
Signature of Plaintiff:	The L. Frath, To	
Printed Name of Plaintiff:	Lictor C. Fourstar, Tr.	
Prison Identification #: 074	118-046	
Prison Address: frossroads	Correctional Lenter, 50 cm	surpoids prive
Shelby	Montona	59474
City	State	Zip Code
ger Complaint Form		(Revised March 2016)

Prisoner Complaint Form
Plaintiff's Last Name _Fourstac

(Revised March 2016) Page 9 of 9